SUBMIT:\* COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

BAYFIELD COUNTY, WISCONSIN APPLICATION FOR PERMIT

Date Stamp (Received) Ş N  $\Diamond$ 

Zoning Dept.

204 Date: Amount Paid: mit #:

\$125.59

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\$125+

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HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)

Refund:

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

☐ Is Property/Land within 300 feet of River, Stream (Ind. Intermittent)  Creek or Landward side of Floodplain? If yescontinue —▶	Section 16 , Township 43 N, Range 5	1/4, par 105 Gov't Lot (s)	PROJECT LOCATION LOCA	Authorized Agent: (Person Signing Application on behalf of Owner(s))	Contractor: Se(4	Address of Property: 43480 ENryan Rd	Joseph Charles Ruelle	TYPE OF PERMIT REQUESTED→► □ LAND USE □ SA
er, Stream (ind. Intermittent) If yescontinue —	w Town of:	CSIM Vol & Page	PIN: (23 digits) 04-034-2-43-	Agent Phone:	Contractor Phone:	Cally WI 54821	818 N 3rd Ave	☐ SANITARY ☐ PRIVY
Distance Structure is from Shoreline:	Mamakagen	e Lot(s) No. Block(s) No.	PIN: (23 digits) 04-034-2-43-05-16-3 05-003-30000	Agent Mailing Address (include City/State/Zip):	Plumber:	[ 54821	Ave Waosao, WI 5441	CONDITIONAL USE X SPECIAL USE
L <del>"</del>	Lot Size	Subdivision:	Recorded D	State/Zip):			T 54401	
Is Property in Are Wetlands Floodplain Zone? Present?	Acreage 6.0		ocument: (i.e. Property Ownership)	Written Authorization Attached □ Yes ½ No	Plumber Phone:	370-6500	Telephone:	B.O.A: OTHER

Proposed Construction:	Existing Structure						28.80°	ļ		Value at Time of Completion * include donated time & material
uction:	Existing Structure: (If permit being applied for is relevant to it)			Property	Run a Business on	☐ Relocate (existing bldg)	★ Conversion	☐ Addition/Alteration	□ New Construction	Project (What are you applying for)
	or is relevant to it)		1.00	☐ Foundation	☐ No Basement	☐ Basement	□ 2-Story	₹ 1-Story + Loft	☐ 1-Story	# of Stories and/or basement
Length:	Length: 3							🖄 Year Round		Use
	30				□ None		3	□ 2	۳, پر	# pedrooms
Width:	Width: 30		□ None	☐ Compost Toilet	☐ Portable (w/service contract)	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	☐ Sanitary (Exists) Specify Type:	X (New) Sanitary Specify Type:	☐ Municipal/City	What Type of Sewer/Sanitary System Is on the property?
Height:	Height: / 2				ract)	ted (min 200 gallon)	y Type:	Type: S		ype of ary System rroperty?
		J		•	•			X Well	□ City	Water

Shoreland

 $\hfill\Box$  Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue

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Distance Structure is from Shoreline :

Is Property in Floodplain Zone?

Yes
No

Are Wetlands
Present?
□ Yes

 No

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	×	_	Other: (explain)	29 2910
	X )		Conditional Use: (explain)	April 1000 at 1
	×	_	Special Use: (explain)	Hec'd for Issuance
	-			
	× -		Accessory Building Addition/Alteration (specify)	
	×		Accessory Building (specify)	wunicipal use
The state of the s	×		Addition/Alteration (specify)	
	×		Mobile Home (manufactured date)	
	× ~		Bunkhouse w/ (☐ sanitary, or ☐ sleeping quarters, or ☐ cooking & food prep facilities)	
	×		with Attached Garage	Commercial Use
	× -	_	with (2 <sup>nd</sup> ) Deck	
SEED AND MINISTER OF THE SEED	×		with a Deck	
	×		with (2 <sup>nd</sup> ) Porch	
	×		with a Porch	X Residential Use
	28x (2)	نه	with Loft	
8	30 × 30 )	_ ئې	Residence (i.e. cabin, hunting shack, etc.)	×
	x )	(	Principal Structure (first structure on property)	
Square Footage	Dimensions	Dir	Proposed Structure	Proposed Use 📗 🗸

Owner(s): X (If there are Multiple on the Deed  $\underline{\mathbf{Ail}}$  Owners must sign  $\underline{\mathbf{or}}$  letter(s) of authorization must accompany this application) Date 5-22-14

Address to send permit (If you are signing on behalf of the Same Ω 'n Q. bove er(s) a letter

Authorized Agent:

Copy of Tax Statement V recently purchased the property send your Recorded Deed

Date

this

